AMERICAN AIRCRAFT SYSTEMATICALLY ATTACK HOSPITALS AND SANITARY CENTRES OF THE DEMOCRATIC REPUBLIC OF VIETNAM

PUBLISHED BY THE D.R.V. RED CROSS SOCIETY
HANOI — 1965

AMERICAN AIRCRAFT SYSTEMATICALLY ATTACK HOSPITALS AND SANITARY CENTRES OF THE DEMOCRATIC REPUBLIC OF VIETNAM

AMERICAN AIRCRAFT SYSTEMATICALLY ATTACK HOSPITALS AND SANITARY CENTRES OF THE DEMOCRATIC REPUBLIC OF VIETNAM

PUBLISHED BY THE D.R.V. RED CROSS SOCIETY
HANOI — 1965

Since February 7, 1965, the U.S. Air Force has stepped up its destructive raids on North Vietnam. Among these destructions, mention should be made of many hospitals and sanitary centres : more than 40 from February to August.

The major raids are as follows :

— February 7, 1965 : *Bombing and strafing of Donghoi hospital. Many buildings were seriously damaged and 5 patients wounded.*

— February 8, 1965 : *Strafing of Hoxa infirmary. Two sick children were killed.*

— March 26, 1965 : *Bombing and complete destruction of the infirmary at Canhduong. 4 patients were grievously wounded.*

— March 31, 1965 : *Complete destruction of Huongkhe hospital. One patient was killed, many others seriously injured.*

— April 4, 1965 : *Bombardment and complete destruction of the infirmary and maternity home at Phuhai.*

— April 14, 1965 : *Complete destruction of the infirmary and maternity home at Ductrach. 2 persons were seriously wounded.*

— May 4, 1965 : *Complete destruction of Vinhlinh hospital. Nearly 20 buildings were razed including the hospital wards, the service of radiology, the operating room, laboratory...*

— May 23, 1965 : *Complete destruction of Vinhlong infirmary.*

— *Bombardment and destruction of Nghiadan hospital causing many casualties including children.*

— From June 12 to 22, 1965 : *Successive bombardments and complete destruction of Quynhlap leprosery (the most important of its kind in the D.R.V.). 160 buildings including the treatment rooms, laboratories, chemist's shops, clubs, were razed. 139 persons were killed, 80 wounded. Nearly 2,000 lepers were homeless.*

— June 14, 1965 : *Bombing of Quangtrach hospital killing one patient and wounding 5.*

— *Bombing of the treatment station at Badon killing 23 persons and seriously injuring 3.*

— From June 18 to 22, 1965 : *Successive bombardments and complete destruction of Sonla hospital.*

— July 1, 1965 : *Bombardment and complete destruction of Tuyenhoa hospital.*

— July 8, 1965 : *Bombing of the hospital for tuberculous patients at Thanhhoa (one of the most important treatment centres in the D.R.V.). 40 persons were killed including one doctor and a great number of persons injured.*

— July 9, 10 and 11, 1965 : *Successive bombardments and complete destruction of the hospital, the epidemiological station, the dispensary for tuberculous patients, the dispensary for the protection of mothers and children... of the town of Yenbai, killing 57 persons, most of them were doctors and hospital staff.*

— July 11, 1965 : *Bombardment and complete destruction of the treatment centre at Cualo killing one and wounding many persons.*

— August 23, 1965 : *Bombing of Uongbi hospital causing many casualties.*

Can we say that the American airmen have mistaken their targets? We can hardly believe it. Most of these hospitals and health centres include a whole series of buildings, standing on large areas and easy to spot. For instance the Quynhlap leprosery which faced 14 attacks, is composed of 160 buildings erected deep in a cove at the seaside, far from all towns and main communications lines. The American command boasts of having taken aerial photos, capable of detecting on the North Vietnamese territory the smallest targets such as rocket launching pads. How could it take a town of three thousand souls set up since 1957 for a military target?

They were in fact operations launched to terrorize the North Vietnamese people with a view to making them accept Washington's "peace" conditions. But the Vietnamese people will never surrender on bended knees. They fight stubbornly

against the attacks by the American aircraft (more than 600 planes were brought down from August 5, 1964 to end of September 1965) ; on its part, with heroism and by many initiatives, the Vietnamese medical corps, successfully solve the medical and sanitary problems of the country, despite repeated air raids.

Hereunder we will give some information on the two most important centres already destroyed : the leprosery at Quynhlap and the hospital for tuberculous patients at Thanhhoa.

THE QUYNHLAP LEPROSERY

Leprosy is one of the major social scourges which the Government of the Democratic Republic of Vietnam pays particular attention to curing and preventing. Since the re-establishment of peace in 1954, the two leproseries left by the old regime have been modernized and three new ones built, of which two are set up in mountain regions to serve the ethnical minorities and the third one, the most important, located at Quynhlap, is a centre of treatment as well as of research for the whole country.

The Quynhlap leprosery was established in 1957 in a beautiful coastal region, in which, up to that time, there was not a living soul. 160 buildings house more than 2,000 lepers coming from all corners of the country after a tracking down of the disease and a bacteriological survey. The centre includes :

— a section for bedridden patients or those exposed to grave complications,

— a section for bacilliferous patients,

— a section for non-bacilliferous patients,

— buildings in which are housed the lepers whose wounds are healed and who are waiting to return to normal life.

During their stay at Quynhlap, the lepers can engage in many activities such as : study, activity in the field of art, learning of a trade. It is not rare to see patients who come in illiterate and go out with some educational standard. Many inpatients go in for farming or animal husbandry.

Quynhlap has thus become a genuine community in which the lepers are not only tended but live a true social life. Many of them are not only cured but have undergone a radical change.

Quynhlap is also an important scientific research centre. The laboratories of pathological and bacteriological histology and of biological chemistry are provided with a rich material. In co-operation with other services, Quynhlap has brought out many works especially concerning the tracking down of leprosy and its treatment :

— promoting role of external traumatism of barefooted people ;

— importance of systematic nervous exploration ;

— elective localization of bacilli in the superficial derm and pilous follicles ;

— treatment of leprous fever by novocaine through intramuscular injection or perirenal injection. Adjuvant role of diuretic and of the regime of life ;

— acupuncture and paraffinotherapy in leprous neuralgia ;

— treatment of penetrating pain by plastered immobilization or resection of the bone ;

— treatment of cubital clip ;

— trying with sulphonals in high doses ;

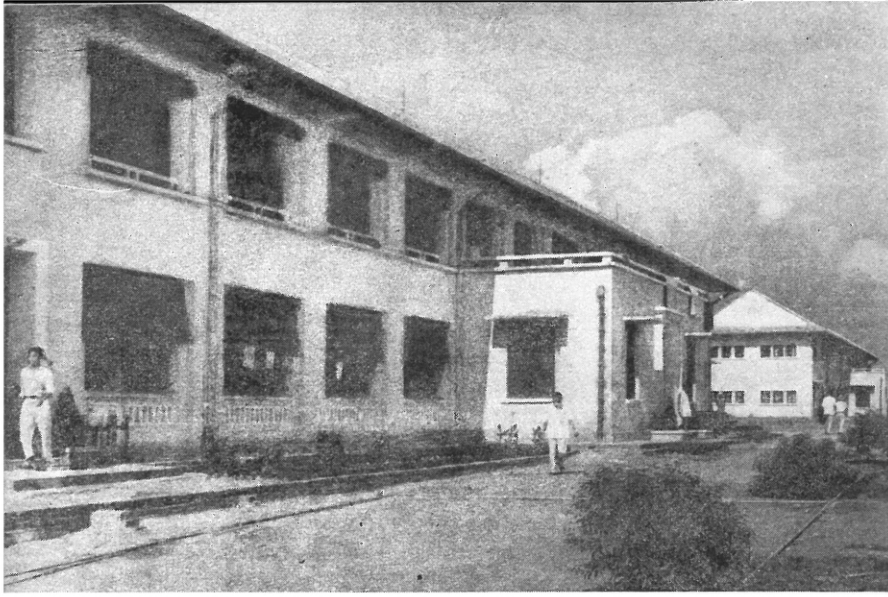
— association of Bacillus subtilis with sulphonals, etc.

Many foreign doctors have come to Quynhlap to exchange experiences with Vietnamese doctors.

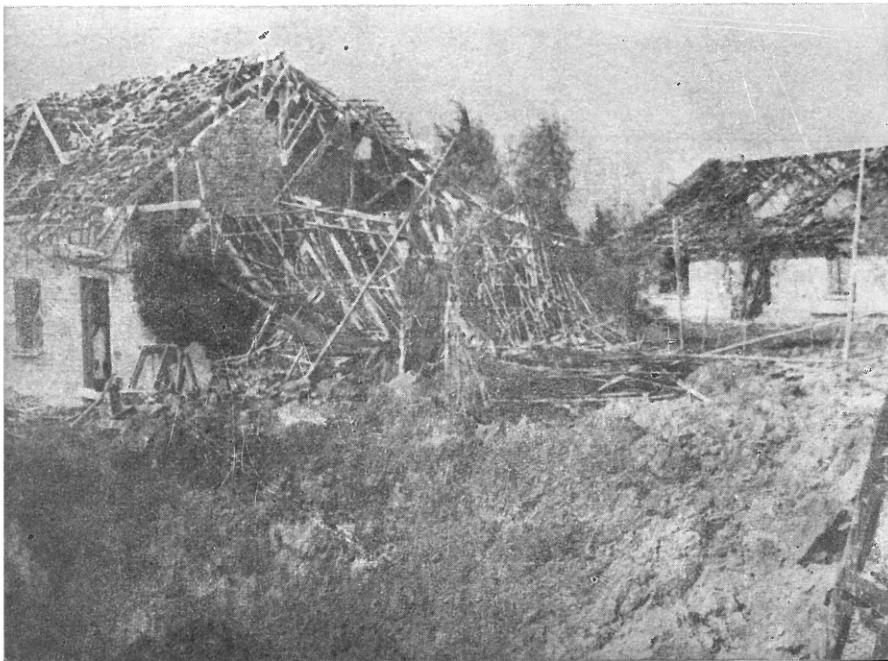
*
* *

From June 12 to June 22, 1965, U.S. aircraft launched 14 raids against Quynhlap centre, killing 139 lepers and medical workers and seriously wounding 80 others. Nearly 2,000 patients are now shelterless. The buildings are destroyed.

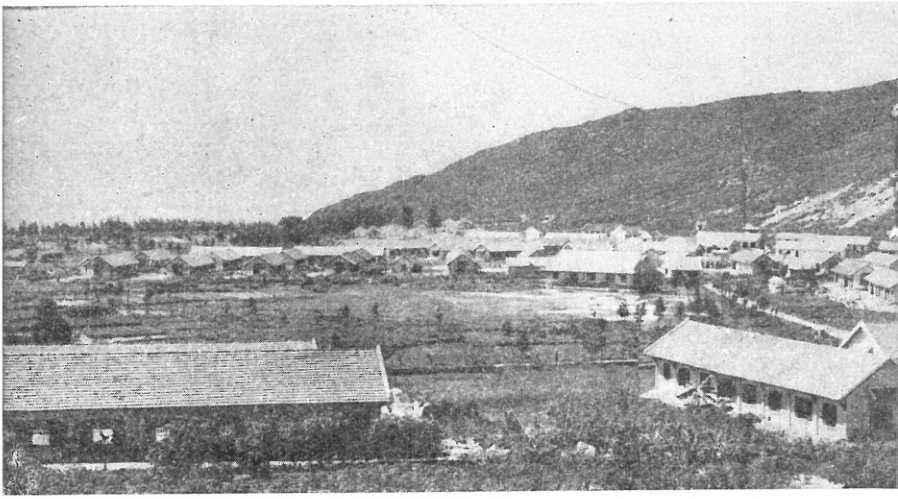
A physician of the hospital for T.B. patients in Thanhhoa province killed by U.S. bullets at the beside of his patients



Could this quiet hospital for T.B. patients in Thanhhoa be considered as a military target ?

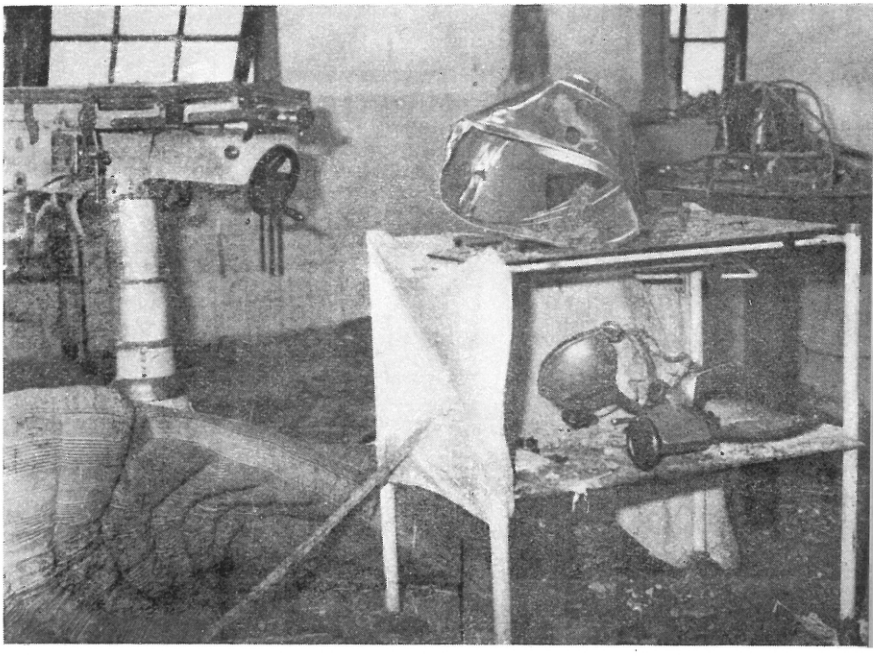


A corner of the hospital after the passage of U.S. planes



The Quynhlap leprosery, an important hospital and research centre set up at the seaside, is now a heap of rubble

Pham Van Vien, a patient in the Quynhlap leprosery victim of a U.S. air raid



The laboratory of the Sonla provincial hospital after a U.S. air raid

The maternity home of the Yenbai provincial hospital strafed by the U.S. aviation

THE K-71 HOSPITAL FOR TUBERCULOUS PATIENTS AT THANHHOA

K-71 hospital is built in a picturesque locality some kilometres from the head-town of Thanhhoa province. It is composed of some fifty buildings in which are housed 600 patients and a staff of 243 members including 32 doctors and pharmacists. A big hall is used for scientific meetings and weekly theatrical performances or movie-shows. Important laboratories are attached to this hospital.

*
* *

K-71 is one of the essential links in the anti-tuberculous network set up a decade ago by our health service. After the re-establishment of peace in 1954, throughout the country there were in all 80 beds for consumptive persons incorporated in a general hospital. What is to be done to care for hundreds of thousands of patients and to carry out an efficient prophylactic work ?

Our medical workers have buckled down to a double task, that of finding on the one hand the methods of detecting the disease, of treatment

and prophylaxis suitable to a poor country; on the other hand, of fostering cadres and setting up a medico-social organization to cope with the situation. A major part of these researches have been conducted at K-71 with the co-operation of the Central Institute for Tuberculous Patients and other departments.

*
* *

For the detection of the disease, we make use of radiography but resort mainly to bacteriology. The sole use of BCG-test has given us entire satisfaction since seven years.

The joint treatment by INH, strepto and PAS proves to be too expensive and difficult to apply in a country which runs short of means ; after painstaking researches we have perfected an original method of treatment by INH in conjunction with injections of Filatov's biostimulines in the pulmonary acupuncture zone (omovertebral area). Applied in tens of thousands of cases, this treatment has shown as efficacious, if not more, as the association of INH, strepto and PAS. It is not too expensive and can be handled by a rural nurse after a few months' training.

Of late, we have striven to use together the injections of Bacillus subtilis and INH and the results bid fair to be satisfactory.

We have resumed the researches on dead BCG and found that, killed piecemeal in one month at

43°C, BCG show themselves as immunizing and allergic as the living BCG without having their disavantages. Applied on a large scale since five years (several millions of vaccinations were given) the killed BCG have revealed themselves most efficacious.

K-71 has actively taken part in all these clinical and immunological researches.

*
* *

However these researches do not reflect all the activity of K-71 hospital, which covers all Thanhhoa province and its 1,700,000 inhabitants. The dispensary of the hospital is a model of its kind in our country and has become the pilot-centre for the organization of the struggle against tuberculosis in various provinces.

In this extra-hospital organization, we must overcome two major difficulties. First, like all developing countries, we must complement the intra-hospital treatment by large scale extra-hospital treatment. This can be successful only thanks to a close attendance on the patients. Inspired by an initiative of the dispensaries of the city of Hanoi and the province of Namdinh, Thanhhoa province is able to secure this attendance by "groups of patients". These are small groups of from 10 to 20 patients according to their living quarter which enables them easily to see one another. They appoint their group

leader who is most of the time an in-patient having a long stay in the hospital. They give counsel to one another concerning the regular taking of drugs, the strict observance of the regulation on rest and hygiene. The doctor or nurse of the dispensary regularly attends their meeting or give them all necessary advice or information. Thanhhoa province has now 725 groups of patients numbering over 10,000 tuberculous patients.

The second major hitch is the problem of shortage of hospital-beds which is solved successfully in Thanhhoa under the form of small rural anti-tuberculous station, consisting of an old communal house or huts built with the assistance of the population. In general each of these stations houses from 10 to 20 tuberculous patients who provide themselves with bedding, bowls, and cooking utensils. The medicines are supplied by the state but the patients have to feed themselves by their own means. Usually the local agricultural co-operative would allocate them a patch of land near their station, and they can use their "curative agent" labour to farm this land so as to eke out their daily ration. The hospital attendant or sanitary agent of the village works in these stations which are also centres for anti-tuberculous struggle and propaganda for general hygiene. He keeps the BCG vaccination book and at the same time encourages the inhabitants to sink wells and build hygienic latrines.

Thanhhoa province has made the best use of this initiative. Some stations are run in common

by many villages, some others have even become anti-tuberculous stations for the district. Thanhhoa has now 94 of these stations totalling 1,984 beds.

All this work requires from the doctors of K-71 hospital that they make regular trips to supervise the treatment as well as the prophylaxis of tuberculosis and lung diseases.

Thanks to this organization, Thanhhoa province was able to make from 1960 to 1963 213,863 vaccinations on newly-born babies and 1,450,388 vaccinations and revaccinations on children and adults (our killed BCG vaccine has made it possible for us to increase the immunity of allergic persons by vaccination and revaccination). Moreover, the prevalence rate dropped from 1.12 per cent in 1960 to 0.61 per cent in 1963.

For more ample details we can mention the case of Quangyen village in which this rate has continually fallen since 1960.

Year	Number of inhabitants	Ratio of incidence Radio	Ratio of bacillary incidence
1960	3,056	0.88%	0.22%
1961	3,153	0.63%	0.28%
1962	3,251	0.58%	0.12%
1963	3,470	0.37%	0.11%

Thanhhoa province is proud of its hospital for tuberculous patients and the success of the anti-tuberculous struggle won through the zeal of the medical staff of K-71 hospital. The other provinces in our country strive to take advantage of the experience gained by K-71 hospital to intensify their anti-tuberculous struggle. At many congresses of the International Union Against Tuberculosis we have introduced the experience learnt in our country, a sizable part of which comes from K-71 hospital of Thanhhoa province.

*
* *

In July 8, 1965, at about 8 a.m. that is the rush hour, 40 American jet planes dropped for over one hour, more than 100 bombs including 500-kilog-bombs on K-71 hospital, causing casualties among 40 patients and destroying most of its buildings.

On July 14, 1965, around 6 p.m. American airplanes again attacked the hospital, destroying all what was left standing, killing 2 patients and injuring many others.

D.R.V. PUBLIC HEALTH MINISTRY'S STATEMENT

(EXCERPTS)

...IN recent days, the U.S. imperialists have intensified their air attacks on medical establishments in the D.R.V. The dealth toll among women and children, patients and medical workers has increased day by day. The U.S. imperialists' terrorist acts are more cruel than those of the Hitlerite fascists and the medieval despots.. While mankind is pinning all its hope on science to help eliminate pain and suffering and gradually improving the people's welfare, the U.S. imperialists have brazenly used the achievements of modern science and technology to massacre defenceless patients, even killed the tuberculosis sufferers and lepers, thus trampling underfoot human conscience and the most elementary norms of international law.

It is beyond doubt that the Johnson clique is willing to kill patients, doctors and medical workers in the Democratic Republic of Vietnam, who are engaging in an extremely humanitarian work, namely to protect and preserve the people's health and life, and are striving to contribute to the progress of the world's medicine.

... The Ministry of Public Health of the Democratic Republic of Vietnam, on behalf of all medical workers in the D.R.V. sternly denounces to world opinion these odious crimes of the U.S. aggressors... We call on the whole progressive mankind international health organizations and medical organizations of all countries, medical workers, scientists in the five continents to protest against, and seek all means to stay the bloody hands of the U.S. imperialists, demand that they put an immediate end to their extremely barbarous bombings and strafings, and stop their war of destruction against the D.R.V.

STATEMENT
OF THE D.R.V. RED CROSS SOCIETY
(EXCERPTS)

... In North Vietnam, sanitary establishments have been bombed, strafed 5 or 7, even 14 times by American aircraft which were so cruel as to fire at invalids who were going away with their crutches or patients hiding in the ravines...

American pilots have made hospitals the targets of their attacks. There is not a pretext of error because the hospitals apparently bear a sign of the Red Cross...

On behalf of the D.R.V. Red Cross Society, we are addressing an urgent call to Red Cross Societies all over the world in order that for the sake of the right of man and humanity, they severely condemn the barbarous crimes of the American imperialists and demand that they put an immediate end to their shocking inhuman actions such as bombings and strafings of hospitals, killing of sick persons in North Vietnam...

SOME FIGURES ABOUT THE MEDICAL AND SANITATION SERVICE IN THE D.R.V.

MEDICAL AND SANITATION NETWORK:

1. In the villages:

— *Infirmaries-maternity homes:*

1955: 200 — 1964: 5,274

— *Assistant doctors:*

1960: 0 — 1964: 2,329

— *Male and female nurses:*

1955: 6,979 — 1964: 26,378

— *Midwives:*

1955: 1,814 — 1964: 13,744

2. In the enterprises:

— *Hospitals and infirmaries:*

1956: 42 — 1964: 183

— *Number of beds:*

1956: 1,020 — 1964: 6,135

— *Medical personnel:*

— Assistant doctors:

1958: 88 — 1964: 587

(In 1964, 1 assistant doctor for 850 workers).

— Doctors :

1958 : 6 — 1964 : 72

HOSPITALS AND TREATMENT CENTRES

— *Hospitals :*

Before 1945 : 47 for the whole of Vietnam (North and South).

1955 : 78 — 1964 : 480

— *Beds :*

1955 : 4,000 (1 bed for 3,500 inhabitants).

1964 : 28,891 (1 bed for 600 inhabitants, or 1 bed for 200 inhabitants if one includes the beds in the village infirmaries and maternity homes).

— *Doctors :*

Before 1945 : 1 doctor for 180,000 inhabitants.

1964 : 1 doctor for 13,000 inhabitants and 1 assistant doctor for 3,000 inhabitants.

PROTECTION OF THE MOTHER AND THE CHILD :

— *Death rate of women in childbirth :*

1945 : 20 per thousand
1957 : 12 —
1961 : 1.3 —
1963 : 0.4 —

— *Death rate of newly-born babies :*

1945 : 200 per thousand
1957 : 111.9 —
1961 : 23.1 —
1963 : 15.8 —

YOU CAN READ IN № 6 OF

VIETNAMESE STUDIES

review

The Medical and Sanitary Organization of the Democratic Republic of Vietnam

Subscribe to

XUNHASABA

32, HAI BA TRUNG HANOI